



Dear Senator Healthcare Chair Paterson and Members of the Committee:

Thank you for the opportunity to offer testimony in support of HB 2508. As a Board member of ONA and the Nurse Practitioners of Oregon, I represent 15,000 registered nurses and nurse practitioners across the state. I am a 6th generation native Oregonian who has practiced as a Family Nurse Practitioner in Oregon for over 19 years and I stand with ONA in support of HB 2508.

Serving our patients and their needs is of utmost importance. Whether systemically initiated by the pandemic, Telehealth was a long awaited service that many healthcare providers knew already would be essential if we were to care for our patients in our modern times. It remains imperative if patients are to gain the ability to have the best healthcare possible. Telehealth has improved outcomes in a positive, transformative way, especially for mental health and primary care. Telehealth must be reimbursed fully by payers and should never be rolled back.

As is well known, there is a shortage of primary care and mental health services in Oregon and nationally. 16,000 Primary Care Clinic closed in 2020 as well as many larger healthcare facilities faced layoffs in spite of the rising needs of our patients. Patients are still sick and need to be cared for. I directed and worked the frontline of a Patient Centered Primary Care Home at a level in 2020 that far exceeded any previous year of my practice. The demands as a result of the pandemic are not near being alleviated and the way we practice medicine is forever changed.

I have learned to navigate Telehealth and was able to maintain my connection with my patient panel as well as allow for many other new patients to be seen over the last year. Some I have never met in person. I managed chronically ill persons who were not pre-pandemic classified as homebound but had significant trouble making an in-office visit. At first I scanned my patient panel to be sure no one would be left unattended or alone. I was concerned it would be difficult to offer the care via Telehealth, however instead, I have been able to capture patient visits I wouldn't have otherwise to prevent adverse health progression or to tend to mental health flare ups and numerous other scenarios without long wait times. Our clinic has saved our patients and hence tax payer dollars from many ER visits, hospitalizations both physical and psychiatric admissions by offering Telehealth. The combination of both Telehealth and in-office visits, I find to be the most beneficial for the patients. Furthermore, patients have been able to attend visits more consistently, rarely missing appointments, thus improving pace and adequacy of recovery. In effect relationships are built, and patients are better equipped to manage a health crisis or continuing health care needs.

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I am Medical Director of a Primary Care Practice with integrative Behavioral Health Services. Our staff and providers are working diligently to serve our patients in the full capacity that is possible. Serving on the Advisory Board for OHA and the PCPCH I am well aware that the goal for better patient outcomes and care requires each primary care practice advance steady care without a breach in services. Telehealth must be available for this and be fully recognized as equivalent care as an in-office visit in order to best serve our patients.

Telehealth vastly improves the ability of patients to access effective treatment in a timely and personal manner. Statistics show that when a patient has a trusted relationship with a medical provider they have less adverse outcomes. Telehealth bridges the gap that pre pandemic sorely needed to cover.

Giving reference to those of us on the frontlines please take my advice with serious consideration. I urge your support for HB 2508.

Sincerely,

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Medical Director  
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